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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF COR	PORATION: SOUTHERN IN	DUSTRIAL TIRE OF SOUTH FLC	PRIDA, INC.
DOCUMENT N	UMBER: M82352		
The enclosed Arti	cles of Amendment and fee a	re submitted for filing.	
Please return all c	orrespondence concerning this	s matter to the following:	
KOI	EN ROELENS		
	(Name o	of Contact Person)	
sou	JTHERN INDUSTRIAL TIRE OF	SOUTH FLORIDA, INC.	
	(Fir	m/ Company)	
299	5 NW 76th STREET		
		(Address)	
MIA	MI, FLORIDA, 33147		
	(City/ Sta	ate/ and Zip Code)	
For further inform	nation concerning this matter,	please call:	
KOEN ROELENS		at (305) 696 1076	
(Nan	ne of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a chec	k for the following amount:		
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div	niling Address nendment Section vision of Corporations D. Box 6327	Street Address Amendment Section Division of Corporators 409 E. Gaines Street	ations

Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 10, 2005

KOEN ROELENS SOUTHERN INDUSTRIAL TIRE OF SOUTH FL 2995 NW 76TH STREET MIAMI, FL 33147

SUBJECT: SOUTHERN INDUSTRIAL TIRE OF SOUTH FLORIDA, IN >.

Ref. Number: M82352

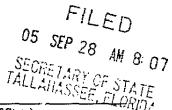
We have received your document for SOUTHERN INDUSTRIAL TIRE OF SOUTH FLORIDA, INC., however, upon receipt of your document no sheck was enclosed. Please send a check or money order payable to the Der artment of State for \$35.00.

If you have any questions concerning this matter, please either respon I in writing or call (850) 245-6905.

Letter Number: 305A0()51223

Thelma Lewis
Document Specialist Supervisor

Articles of Amendment to Articles of Incorporation of



SOUTHERN INDUSTRIAL TIRE OF SOUTH FLORIDA, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

M82352	
(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Prof</i> eadopts the following amendment(s) to its Articles of Incorporation:	Corporation
NEW CORPORATE NAME (if changing):	
N/A	
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," " (A professional corporation must contain the word "chartered", "professional association," or the a	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate A: and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	icle Number(s)
PLEASE ADD DIRECTOR:	
	·
ROELENS, KOEN	
2001 ATLANTIC SHORES BLVD #517	
HALLANDALE, FLORIDA, 33009	:
(Attach additional pages if necessary)	
If an amendment provides for exchange, reclassification, or cancellation of issued for implementing the amendment if not contained in the amendment itself: (if not at	
N/A	-
	,
(confinued)	•

The date of each amendment(s) adoption: 08/05/2005
Effective date if applicable: 08/08/2005
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group intitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficien for approval by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without hareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without share nolder action and shareholder action was not required.
Signed this 06th day of AUGUST 2005 Signature (By a director, president or other officer - if directors of officers hav not been selected, by an incorporator - if in the hands of a receiver, trustee, o other court
appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
<u>GENERAL MANAGER LATIN-AMERICA</u> (Title of person signing)

FILING FEE: \$35